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File with: lowe Ethics and Campaign Disclosure Board 510 E. 12", Ste. 1A Des Moines, lowe 50319 Fex: 515-281-4073

IFOR INSTRUCTIONS, SLIE BACK OF FORM CISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as or: Statement of Organiz	zatky)		
LOU OSWALD FOR CITY	Y COUNCIL	FORM DF2-2	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (1) City PAC (10) School Bo	to 17 School Roant or Other Political	(Rev. 07/2007)	DISCLOSURE FEPORT
(11) Local Ballot Isaue		Comm . #	15150
CANDIDATE COMMITTEES ONLY: Candidate Name CU CSW+1_D	l ³ olítical Party (if applicable)	Logge I in	n
Office Sought ND WARTS	District (if Senate or House)	t etibuA	
Late reports are subject to possible civil ard criminal pensities. Pursicandidate's committee, and the chairperson, for any other type of co	mm ttee, is the individual responsible	 for filing time by and ac 	citate riporta.
SIGNATURE OF PERSON FILING REPORT	635825673	01-10	728
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE	S GN !D
I AM FILING A FINA (_ FLEPORT FOR (1) ELECTION /		E.R.
(report date)	Indicate by #		
CHECK IF AMENDMENT TO REPORT (:ATED		ocal Committe es, enter D	a e of Election
☐ Check if this is final (termination) report and attach Notice of D (You must continue to file reports until a DR-3 is filed.)		County & Local Committee	ent il County in
STATEMENT OF CASH ON HAND			
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R INSTRUCTIONS, SEE BACK OF FORM	ALL CONTROLS
EXPENDITURES - MONEY SPENT FROM COMMITTEE AC	CCOUNT

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> CHECK HIS BOX IF AMEND IG ORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

COMMITTE	E NAME (Must be :	samu as on Statement of Organi; ation)		
<u>مـا</u>	U OSW	AUD FOR CT-YO	ouncil	
DATE EXPENDED (MM/DDYR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursoment) WAS MADII	PURPOSE (DESCRIBE TRANSACTION)	AF (DUNT EXI EXDED
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09/12/07	ID# CK#	LICTOR STORE CON SECON SOUTH SECON THE STORE TA SECON	CAMPAIGN SIGUS	:31200
9/15/07	ID# CK#	TEO TA SOON	STAMPS	L.100
9/2/67	ID#	CERT WORKS ESWACKERPUTZA IXBO-JA-SZCOL	CAMPAIGN	7,551
त्राष्ट्राक	ID# CK#	HAPTIG DRUGT 1600UNIVERSON 13:30 IA SZEOI	STAMPS	3340
9/30/07	CK#	THE DURINGUELDARD 15-7 CONTRAL AVE 18-0- IA SOXXXI	ADVERTISING.	150°
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Purchases of certain compaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructio 5.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be det. I ite nized on Schedule G by the amount, purpose, and latte of each type of expenditure made by the person/entity on behalf of the candilate's committee. (Refer to Schedule G instructions and lows Code B (A.4.22(3)(i).)

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